

Valorum Care Limited

Alne Hall - Care Home with Nursing Physical Disabilities

Inspection report

Alne Hall

Alne

York

North Yorkshire

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Tel: 01347838295

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Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service

Alne Hall Care Home with Nursing Physical Disabilities is a residential care home providing personal and nursing care to older people and young adults with physical disabilities, learning disabilities and/or autism. The service can support up to 30 people in one adapted building. At the time of this inspection, 29 people were using the service.

The service is larger than recommended by best practice guidance. However, we have rated this service good, because the provider had arranged the service in a way which ensured people received personcentred care and were supported to maximise their independence, choice, control and involvement in the community.

People's experience of using this service and what we found

People felt safe living at the service. Staff were trained to identify and respond to any concerns. Risks to people were managed appropriately and positive risk taking was promoted. Improvements had been made to the management of medicines and people received their medicines as prescribed.

Effective systems were now in place to monitor the quality and safety of the service. Thorough improvement plans were in place and extensive refurbishment had commenced.

People had been asked for their views on the service and improvements had been made in response to suggestions. People and staff felt listened to, and their views were taken into account.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

For more details, please see the full report which is on the Care Quality Commission's (CQC) website at www.cqc.org.uk.

Rating at last inspection

The last rating for the service under the previous provider was requires improvement (published 8 November 2018).

Why we inspected

We carried out an unannounced comprehensive inspection of this service on 8 November 2018 where the service was rated requires improvement. After the inspection, a new provider took over the service.

We undertook this focused inspection to check improvements had been made. This report only covers our

findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Alne Hall Care Home with Nursing Physical Disabilities on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service well-led?	Good •
Is the service well-led? The service was well-led.	Good •



Alne Hall - Care Home with Nursing Physical Disabilities

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was conducted by one inspector.

Service and service type

Alne Hall Care Home with Nursing Physical Disabilities is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the CQC. This means they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was announced. We gave a short notice period of the inspection to allow us to discuss the safety of people, staff and inspectors with reference to COVID-19.

What we did before the inspection

We reviewed information received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to

make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with four members of staff including the registered manager, area manager and two care workers. We reviewed a range of records in relation to people and the support they received. We also looked at two staff's recruitment records as well as records relating to the management of the service, including servicing of equipment and monitoring of accidents and incidents.

After the inspection

We contacted three people who used the service, a nurse and an activities coordinator via telephone to ask their views on the service provided. We also continued to seek clarification from the provider to validate evidence found. We requested some information to be submitted electronically. This included risk assessments for two people who used the service, audits used to monitor the service and meeting minutes.



Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe. Comments included, "I feel safe living here, because the staff are kind and they ask if you want anything. It is nice living here" and "I am very happy here and I've made a lot of nice new friends."
- People were kept safe by staff who had been trained to identify and respond to any safeguarding concerns.
- Systems and processes ensured any safeguarding concerns were appropriately recorded and responded to.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Systems were in place to identify and reduce risks to people. Care plans included risk assessments that had been regularly reviewed to ensure they remained relevant.
- Staff understood the importance of promoting people's independence and freedom yet minimising any related risks.
- Regular checks had been completed to ensure any equipment used was safe and appropriately serviced.
- Accidents and incidents had been recorded. A system was in place to monitor accidents and incidents and reduce risks where possible. Any lessons learnt were shared with staff.

Staffing and recruitment

- Safe recruitment processes were followed. This ensured suitable staff were employed.
- A safe number of staff were on duty. Staff were visible throughout the inspection and responded to people's needs in a timely manner. The registered manager had changed staffing levels at mealtimes to ensure people received the support they needed.
- People told us there was generally enough staff and staffing levels had improved recently. One person said, "There is quite a few staff here and they all do what they are meant to do."

Using medicines safely

- People told us they received their medicines as prescribed.
- Medicine were stored, recorded and administered appropriately.
- Improvements had been made to the medicines process. Where people were prescribed 'as and when required' medicine, appropriate protocols were now in place. Systems were also in place to allow staff to monitor the effectiveness of these medicines when administered.
- Staff had received medicines training and their competencies were assessed.

Preventing and controlling infection

- The registered manager and staff team had implemented government guidance in relation to COVID-19. Staff were observed following this throughout the inspection site visit.
- Good infection control practices were in place. The service was clean and tidy throughout with no malodours.
- A programme of refurbishment was ongoing. Where paintwork was damaged, making it harder to keep clean, work had been completed or was planned to address this.



Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- An effective quality assurance system was now in place. Regular audits were completed. These were effective in highlighting concerns and areas for improvement and covered areas such as pressure areas care and weight management, which had a positive impact on people's lives.
- Processes were in place to ensure the provider had effective oversight of the service. Senior management visited the service on a monthly basis and offered support and guidance to the registered manager.
- The registered manager was aware of their role and responsibilities and kept up-to-date with best practice. They had submitted notifications to CQC as required.
- The registered manager worked to develop their team so that staff at all levels understood their roles and responsibilities. Regular meetings took place to ensure staff understood what was expected of them.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The culture of the service had improved. The registered manager had worked hard to improve staff's morale and communication.
- Staff were encouraged to share their views, kept informed of changes within the service and able to contribute to decisions about changes. Comments included, "I enjoy coming to work every day" and "Issues are dealt with now rather than being brushed away. There is a sense of investment, which is great."
- The provider was responsive to issues and concerns; they understood their responsibility to be open, honest, and apologise to people if things went wrong.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Continuous engagement was encouraged by the provider and registered manager. They engaged with people, as well as relatives and professionals to ensure the service provided person-centred, high-quality care. Feedback was listened to.
- The provider was committed to continually improving the service; they had invested in the service to ensure they were meeting regulatory requirements and to ensure environmental improvements were made.
- Systems were in place to ensure lessons were learnt when things went wrong. Continuous learning was promoted by the registered manager. Any learning was shared with the staff team.
- The registered manager worked in partnership with others to further develop the service. They had built

good relationships with other professionals to improve people's health and wellbeing.